

UNITED STATES DEPARTMENT OF COMMERCE Patent and Trademark Office Address: COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20231

	APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO.	
10/022947					
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	INTERVIEW SUMMARY Tuterview on 1/30/0				
Allp	articipants (applicant, applican	's representative, PTO personne	u gravi i komo o o o o o o o o se komo. Sil): A o o o o o o o o o o o o o o o o o o	and the second s	
(1)_	Marsha Bauk	3 - Harold	(3) Wei We	zi Jeana	
(2)_	V. Paul Harpe	(M. Switz File <u>Filedori</u> V	(4) R.M. W.) indham	
Date	of Interview		Donco	KO WASTER WASTER	
Type: Telephonic Personal (copy is given to applicant Eapplicant's representative).					
Exh	bit shown or demonstration cor	ducted: Yes No If yes,	brief description:	Same of the second	
	nement Wwas reached. w	20		en in Francisco La Regional de la Companya de la Co	
lden	tification of prior art discussed:	Hotching	<u>5,268,89</u>	17	
Description of the general nature of what was agreed to if an agreement was reached, or any other comments: Applicant will provide a formal amendment					
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mus	iller description, if necessary, a be attached. Also, where no c hed.)	opy of the amendments which w	available, which the examiner agree yould render the claims allowable is a	ed would render the claims allowable available, a summary thereof must be	
1.	It is not necessary for applica	nt to provide a separate record o	of the substance of the interview.	in the second of	
actio SUB	ss the paragraph above has be OT WAIVED AND MUST INCLI n has are ready been filed, API STANCE OF THE INTERVIEW	en checked to indicate to the co JDE THE SUBSTANCE OF THE PLICANT IS GIVEN ONE MONT	ntrary. A FORMAL WRITTEN RESP INTERVIEW. (See MPEP Section) H FROM THIS INTERVIEW DATE T	PONSE TO THE LAST OFFICE ACTION 713.04); If a response to the last Office TO FILE A STATEMENT OF THE	
2. [rejections and requirements t	nat may be present in the last O onse requirements of the last O	ffice action. Applicant is no relieved	now allowable, this completed form I from providing a separate record of	
Exar	niner Note: You must sign this f	orm unless it is an attachment to	another form:	D. Barle Harred	
FORM	PTOL-413 (REV.1-98)		AA ay alaa	a Ra la Harried	
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